

11324 U.S. PTO
032504

PTO/SB/05 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032
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UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No.	61683-00004USPT
	First Inventor	Charles R. Stewart
	Title	ANTIMICROBIAL PROTEINS FROM THE SPO1 BACTERIOPHAGE
	Express Mail Label No.	EV382165378US

22141 U.S. PTO
10/809761

032504

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages 34] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 12] 5. Oath or Declaration [Total Sheets 4] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 [Total Sheets 3]	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i> 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input checked="" type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: [Total Sheets 17] i. <input checked="" type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input checked="" type="checkbox"/> Paper c. <input checked="" type="checkbox"/> Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) [3] 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of <i>(when there is an assignee)</i> Attorney 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input checked="" type="checkbox"/> Other: Check for \$428.00#159235 Check for \$40.00#159236 Certificate of Mailing 1.10
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18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☒ Continuation-in-part (CIP) of prior application No.: **60/457287**

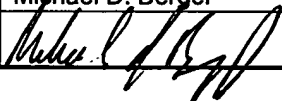
Prior application information: Examiner **N/A** Art Unit: **N/A**

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

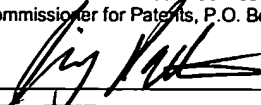
19. CORRESPONDENCE ADDRESS

☒ Customer Number: **24238** OR ☒ Correspondence address below

Name	JENKENS & GILCHRIST, A PROFESSIONAL CORPORATION Tamsen Valoir				
Address	5 Houston Center 1401 McKinney, Suite 2700				
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Name (Print/Type)	Michael D. Berger	Registration No. (Attorney/Agent)	52,616
Signature		Date	March 25, 2004

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV382165378US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: March 25, 2004 Signature:  (Jimmy D. Patterson)

11324 U.S. PTO
032504

Use in lieu of PTO/SB/17 (08-03)
(Form updated to reflect FY 2004 fees effective 10/1/03)

FEE TRANSMITTAL for FY 2004				Complete if Known	
Effective 10/01/2003, Patent fees are subject to annual revision.				Application Number	Not Yet Assigned
				Filing Date	Concurrently Herewith
				First Named Inventor	Charles R. Stewart
				Examiner Name	Not Yet Assigned
				Art Unit	N/A
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27				Attorney Docket No.	61683-00004USPT
TOTAL AMOUNT OF PAYMENT		(\$)		428.00	

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account: Deposit Account Number: 10-0447 Deposit Account Name: Jenkins & Gilchrist, a Professional Corporation The Director is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		3. ADDITIONAL FEES	
1. BASIC FILING FEE			
Large Entity Small Entity	Fee Code Fee (\$)	Fee Code Fee (\$)	Fee Description
1001 770 2001 385	Utility filing fee		Fee Paid
1002 340 2002 170	Design filing fee		
1003 530 2003 265	Plant filing fee		
1004 770 2004 385	Reissue filing fee		
1005 160 2005 80	Provisional filing fee		
SUBTOTAL (1)		(\$)	
		385.00	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			
Total Claims	16	-20** =	0
Independent Claims	4	-3** =	1
Multiple Dependent			
Extra Claims	0	Fee from below	0
Fee Paid		Fee Paid	0.00
Independent Claims	4	Fee from below	43.00
Fee Paid		Fee Paid	43.00
Multiple Dependent			
Large Entity Small Entity	Fee Code Fee (\$)	Fee Code Fee (\$)	Fee Description
1202 18 2202 9	Claims in excess of 20		
1201 86 2201 43	Independent claims in excess of 3		
1203 290 2203 145	Multiple dependent claim, if not paid		
1204 86 2204 43	** Reissue independent claims over original patent		
1205 18 2205 9	** Reissue claims in excess of 20 and over original patent		
SUBTOTAL (2)		(\$)	
		43.00	
**or number previously paid, if greater; For Reissues, see above			
SUBMITTED BY		(Complete if applicable)	
Name (Print/Type)	Michael D. Berger	Registration No. (Attorney/Agent)	52,616
Signature		Telephone	(713) 286-2018
		Date	March 25, 2004

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Dated: March 25, 2004 Signature: _____ (Jimmy D. Patterson)

Application No. (if known):

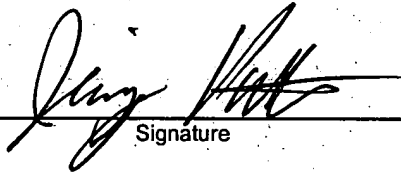
Attorney Docket No.: 61683-00004USPT

Certificate of Express Mailing Under 37 CFR 1.10

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on March 25, 2004
Date



Signature

Jimmy D. Patterson

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

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Application Data Sheet (3 pages)

Statements verifying identity of Sequence Listing

Sequence Submission on CRF

Sequence Listing on CD-ROM

Sequence Listing (15 pages)

Postcard